

28 November 1955

MEMORANDUM FOR: Deputy Director (Support)

By:

: Director of Communications ATTENTION

Deputy Director of Personnel

SUBJECT : Agency Manpower Study

: Memorandum, subject as above, dated 17 November 1955 REFERENCE

1. As directed in referenced memorandum the following report is submitted for the Medical Staff:

## a. Manpower Reduction:

No reduction of Medical Staff manpower from its current under-strength status is possible without radically revising its basic function. The Medical Staff is considered (e.g., in budget presentations) to have one function or activity: that of the provision of medical service to the Agency. A division of this one function into sub-functions such as physical examinations, referrals, and consultations is neither logical nor realistic; all these "sub-activities" form one closely integrated whole. As recently as 2 August 1955 a lengthy Management-Personnel study was completed that set the appropriate strength of the Medical Staff for the proper provision of medical service to the Agency at persons. There are current persons assigned against this Table of Organization of 25X9A2

25X9A2

#### Duplication:

There are no known areas wherein the Medical Staff performs any activity which is also being performed in whole or in part by another component of the Agency or by another Government agency. There are areas, to be sure, wherein the efforts of the Medical Staff are closely integrated with the activities of other components but this should not be mistaken for duplication. Examples of this are the activities of the Medical Staff in coordination with the Office of Training, and with the Office of Personnel in professional procurement, each of which require the participation of professionally trained personnel.

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### c. Present manpower capability:

It is the opinion of this staff that its present manpower capability is not consonant with the requirements considered to be proper to the Medical Staff. An example may be cited: as a result of the Management-Personnel survey mentioned above, it was determined that there is a bona fide need for a position of Registrar, which individual would work closely with the staff physicians and psychiatrists in the medico-administrative aspects of clinical medicine; such individuals have been determined by military and civilian medicine to contribute greatly to the efficiency of medical service as well as to increase the number of patients that physicians can see. By reason of the imposition of the personnel ceiling as of 31 July 1955, however, this position has not been filled. In order to fulfill its obligation to the Agency, the Medical Staff should be authorized additional manpower to staff this Registrar function as well as the remainder of the positions provided for in the Table of Organization of 2 August 1955.

### d. Desirable tasks deferred:

The deferral of the development of the Registrar function has meant that certain physicians of the Medical Staff must continue to carry much of the administrative burden appropriate to the Registrar. This in turn has deferred the further development of such desirable activities as the annual physical examination program.

The present personnel ceiling has also deferred the strengthening of the Administrative Support Division of the Medical Staff. Such strengthening was recommended by the Inspector General as a result of his survey last Spring, and was provided for by the Management Staff and Office of Personnel in the Table of Organization of 2 August 1955. This Medical Staff division is responsible for all Agency medical personnel, supply, and fiscal matters. Current authorization of the two positions originally approved would seem to be clearly in the Agency's interest.

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Acting Chief Medical Staff